				Complete if Known		
Substitute for form 1449/PTO				Application Number	10/029,929	
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				First Named Inventor	Bysted et al.	
INFORMATION DISCLOSURE				Group Art Unit	2616	•
STATEMENT BY APPLICANT (Use as many sheets as necessary)				Examiner Name	Christine Y. Ng	
				Attorney Docket		
Sheet	1	of	1	Number	042933/305222	

	U. S. PATENT DOCUMENTS						
Examiner Initials*	Cite No.	<u>Document Number</u> Number - Kind Code (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages of Relevant Figures Appear		
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Examiner Initials	Cite No.	Foreign Patent Document Country Code - Number Kind Code (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	English Language Translation Attached
/CN/	1	WO 01/69952	09/20/2001			Abstract
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OTHER DOCUMENTS				
Examiner Initials	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	English Language Translation Attached	

	Examiner	(Obviotion No.)	Date	08/11/2008
1	Signature	/Christine Ng/	Considered	00/11/2000

^{*}Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609.

Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.